

of struggle that a writer can even begin to make a living.

As I said before, music is intellectual property—and the owners should be paid for the use of their product—particularly when other businesses are making money by using their work.

Finally, I agree with Rep. Mary Bono in hopes that the House will revisit this issue and its detrimental effect on American songwriters and our international trade agreements in the next session. Enacting Title II of this bill is a grave mistake.

#### MEDICARE HOME HEALTH AND VETERANS HEALTH CARE IMPROVEMENTS ACT OF 1998

SPEECH OF

**HON. LANE EVANS**

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

*Friday, October 9, 1998*

Mr. EVANS. Mr. Speaker, I rise today in support of the bill, H.R. 4567, although I do so with some reservations. The Committee on Veterans' Affairs has a long tradition of bipartisanship in developing constructive policy to meet the needs of veterans. Under the leadership of Chairman BOB STUMP, our Committee considered, perfected and approved, H.R. 1362, the Veterans Medicare Reimbursement Act of 1997. I continue to believe H.R. 1362 better addresses the needs of veterans and VA while simultaneously providing Medicare savings. These Medicare savings would result from authorizing VA to charge the Health Care Financing Administration for certain care provided by VA to certain Medicare-eligible veterans using a discounted Medicare fee schedule or capitated payment rate. H.R. 1362 was approved by the Veterans' Affairs Committee with the support of the Administration and all of the major veterans' services organizations. Working with the Senate Committee on Veterans' Affairs, the Senate Finance Committee included a provision similar to H.R. 1362 in its version of the Balanced Budget Act of 1997. Unfortunately, this provision was not included in the conference agreement. I hope that future negotiations with the Senate will yield a measure more like H.R. 1362—a more thoughtful and cautious approach than the measure we are considering today.

My support for the measure before us today is due to VA's desperate need for funding from non-appropriated sources on which the Administration is depending. Since it received authority to retain medical care cost recovery funds, VA collections have actually declined. VA intended to use both Medicare reimbursement and medical care cost recovery funds to provide 10-percent of its funding from non-appropriated sources. VA's inability to collect the levels of funds it anticipated from these sources has resulted in a serious unanticipated budget shortfall.

Now VA faces a new challenge—the Under Secretary for Health has committed to “take all comers” into its health care system and provide them with specified health care benefits. Since VA has already committed to enrolling both veterans who bring payment for services to the door with them and veterans without such funding, VA will have no additional incentive to treat those in higher-income

groups. I am uncertain what the consequences of Dr. Kizer's decision to enroll all veterans will be for VA, but I know that additional resources will better ensure its ability to honor this commitment without limiting access to care to other veterans with a higher priority to care.

I commend the gentleman from California, Mr. Thomas, for his work on behalf of VA-Medicare Subvention. However, I believe we need to re-assess VA's health care funding sources and end the funding “shell game” which has subjected VA to an uncertain revenue stream for the last three years. It hasn't worked. If VA is to be a high-quality health care system, Congress must be committed to funding the VA with adequate appropriated resources for the next fiscal year and years to come.

#### MEDICARE HOME HEALTH AND VETERANS HEALTH CARE IMPROVEMENTS ACT OF 1998

SPEECH OF

**HON. PATSY T. MINK**

OF HAWAII

IN THE HOUSE OF REPRESENTATIVES

*Friday, October 9, 1998*

Mrs. MINK of Hawaii. Mr. Speaker, although I am an original cosponsor of the original version of H.R. 4567, the Medicare Home Health Care Interim Payment System Refinement Act, I am rising in reluctant support for the bill.

The Balanced Budget Act of 1997 implemented a poorly designed formula for Medicare payments to home health agencies which devastated home health agencies around the country. Reimbursements were slashed across the board and more than a thousand home health agencies either closed or began refusing to accept Medicare beneficiaries. The number of Medicare-Certified Home Health Agencies in my home state of Hawaii went from 28 in October 1997, to 22 in August 1998. A 22 percent decline in ten months.

For every agency that is closed, there are several hundred patients who are abandoned. The situation compels immediate action and I am very pleased the House is addressing this problem. Nonetheless I believe more can be done.

I am distressed that this bill is not retroactive. Many agencies have continued to operate in the red for the past year clinging to the hope that Congress would enact retroactive legislation to fix the payment problem. Agencies will not get assistance for losses they took this year and because of this, many will close even with the additional payments provided by this bill.

Furthermore this bill does not address the additional problems that would be created by the impending home health payment reduction scheduled for September 1999. Unless we address this problem we will be in the same situation next September, as we are in now.

Since H.R. 4567's introduction, numerous unrelated provisions have been added to the bill. One of my main objections to this bill is the inclusion of language expanding the Roth IRA limit from \$100,000 to \$145,000. This is a tax shelter for the wealthy and will cost U.S. taxpayers almost \$5 billion over 10 years while providing little, if any, benefit to the majority of the population.

I am pleased that the bill will enable Medicare to reimburse the VA for services provided to Medicare eligible Veterans by VA facilities. This change is fiscally responsible and is predicted to save the Federal Government money in the long run. However, I am concerned that services previously paid for by the VA would now be extracting scarce resources from the Medicare Trust Fund.

In conclusion, although the meager home health payment increase is not at the level I would have liked, this is a step in the right direction and I am relieved that struggling home health agencies will receive some assistance.

#### TURKMENISTAN: AN OPPORTUNITY TO ENHANCE POLITICAL STABILITY IN CENTRAL ASIA

**HON. EDOLPHUS TOWNS**

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

*Saturday, October 10, 1998*

Mr. TOWNS. Mr. Speaker, I rise today to introduce a sense of the Congress resolution supporting United States assistance to the Republic of Turkmenistan to build pipeline routes or take other measures necessary to resume the export of natural gas.

Turkmenistan, a newly independent Republic, bordering the oil and gas rich Caspian Sea, plays a vital role in the stability of Central Asia, a region that is quickly becoming one of the most strategically important areas in the world.

As we enter the 21st century, it should be the goal of the United States to support the exploration and use of cleaner sources of energy, without hampering economic growth. Turkmenistan, a country with one of the largest reserves of natural gas in the world, plays a key role in reaching this goal.

At this point, political and economic factors have hindered Turkmenistan from exporting its natural gas to the world. The United States must act to assist Turkmenistan in resuming the sale of its natural gas. The resumption of Turkmen gas sales is one of the main hurdles that must be overcome before economic and political stability comes to this region.

Without stability, Central Asia could cease to be a viable source of clean energy for the world, and also deteriorate into a “hot spot” where different cultures and political forces could combine to create a threat to our national security.

Again, Mr. Speaker, I ask my fellow members to support this resolution, and in so doing give Turkmenistan encouragement to promote stability and democratization in the region.

#### TRIBUTE TO DR. IVOR L. GEFT

**HON. BRAD SHERMAN**

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

*Saturday, October 10, 1998*

Mr. SHERMAN. Mr. Speaker, I rise today to pay tribute to Dr. Ivor L. Geft, one of the most dynamic and dedicated physicians in Los Angeles. Dr. Geft is the recipient of The Jewish Healthcare Foundation—Avraham Moshe Bikur Cholim's Ahavas Chesed Award. He is being recognized for his excellence in caring